

Do I need a referral from a doctor to take a Home Sleep Test?

In short, yes. Sleep Studies have to be referred by a physician or primary care provider. Generally, you can call your doctor and ask them to fax us a referral. We are more than happy to help you get a referral by faxing our referral form to your provider. If you would prefer we assist you in expediting the referral process, feel free to call us at 855-70-Sleep M-F 8:30am-5:30pm PT.

Am I a good candidate for this test?

Our test is intended for patients who exhibit symptoms of Obstructive Sleep Apnea (OSA) only. There are many other sleep disorders (narcolepsy, Restless Leg Syndrome (RLS), insomnia, etc.) but OSA is one of the most common, so we look for obvious signs, symptoms and other related medical conditions (called comorbidities). These symptoms include but aren't limited to:

- Loud snoring
- Witnessed pauses in breathing while asleep
- Excessive daytime tiredness
- Morning headaches
- Waking with a dry mouth
- History of high blood pressure
- Memory problems or poor judgement
- Depression
- Overweight
- Diabetes Type 2
- Thick neck
- Personality changes or irritability
- Erectile dysfunction

An easy way to assess your risk is to take the Sleep Quiz on our website. This will tell us, with very high accuracy, whether or not you are good candidate for a Home Sleep Test.

What is the difference between this test and a test performed in a lab?

While a Home Sleep Test (HST) is much more convenient and significantly less expensive than a polysomnography in a lab or hospital, the HST is only looking for OSA.

An HST device comes in a small kit and is designed to be easy for you the patient, to administer. It records your heart-rate, pulse, blood-oxygen level, breathing effort, airflow and snoring. These are the items that are required to diagnose OSA.

A lab test includes a slew of additional recording devices that record things such as brainwave activity, limb movement, eye and jaw muscle activity, as well as those mentioned above for HST. Much more data is compiled which can be used to diagnose a variety of sleep disorders in addition to OSA.

What is the cost of this test? How does that compare to testing in the lab?

One of the first steps in our process is to check your insurance plan for coverage so that we may accurately discuss your cost with you. Additionally, we have made it our policy to limit your out-of-pocket cost to \$399. Many of our patients pay significantly less than that.

Average costs (billed to your insurance):

Lab PSG: \$3,500

Home Sleep Test: \$800

FAQS FOR PATIENTS (CONT.)

Is the test uncomfortable?

Our test is a small device that hangs around your neck and is secured to your body by an elastic belt around your chest. There is another elastic belt that goes around your waste, a sensor that clips on the end of your pointer finger, and a nasal cannula for your nose. Though it won't be the most comfortable couple nights, it is necessary to diagnose OSA. You can watch the instructional video on our website to get a feel of what the test entails.

What if I have to go to the bathroom in the middle of the night during the test?

If you need to use the bathroom while you are taking your test, leave the device turned on and do not take off any of the leads. You may use the bathroom while the device is still recording. If you need to use your hands, remove the sensor from your finger and put it back on when you are finished. Don't forget to put the finger sensor back on when you are done!

How do I get my results?

Your results will be sent to the provider who prescribed your test within 3 business days of receiving the testing unit back from you. If Obstructive Sleep Apnea is indicated, we will send a prescription for the recommended therapy along with your results. This will help speed up the time it takes to get you the therapy you need. Your healthcare provider should follow up with you to go over both the results and discuss the treatment option best suited for your case.

If I have Sleep Apnea, what are my options for therapy?

There are many different options for therapy to address OSA. These include:

1. **Continuous Positive Airway Pressure:** better known as CPAP. This is the gold standard of therapy and often the first line of treatment for OSA. A CPAP blows air through a mask, past your airway obstruction. This "positive airway pressure" will help ensure that your body gets the breath-by-breath oxygen it needs to sustain healthy levels.
2. **Oral Appliance Therapy (OAT):** OAT has made significant advances over the last few years that have made it a great option for patients diagnosed with mild to moderate OSA. This is a custom device made by a Dentist who is a specialist in Sleep Therapy. These devices move your jaw forward while you sleep, allowing your airway to remain unobstructed, giving you greater opportunity to breath clearly. Oral Appliances will also help alleviate heavy snoring.
3. **Positional Therapy:** Your test results will show us in which position your OSA is most severe. If all of your OSA occurs on your back, then Positional Therapy will help keep you off your back. Positional Therapy is most effective when used in combination with any of the other forms.
4. **Surgery:** This is the most invasive of therapies and you will have to talk to an Ear Nose Throat doctor or an Otolaryngologist about surgery options. This is often considered a last resort, for obvious reasons.

What are some of the consequences of Sleep Apnea, if I don't get it treated?

Left untreated, OSA can cause the following:

- Daytime Sleepiness and Fatigue
- Cognitive impairment and poor job performance
- Anxiety
- Depression
- Memory loss and dementia
- Hypertension
- Cardiac disease
- Stroke
- Traffic accidents
- Low Libido
- Erectile Dysfunction (ED)
- Death